Substitute for form 1449/PTO (Revised 04/2003)

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## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)
Sheet I of

Complete if Known

Application Number

For be assigned 10/797, 938

Filing Date

Concurrently herewith 3/11/2004

First Named Inventor

Group Art Unit

Unknown White

046088/267693

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Examiner Initials*	Cite No.	Document Number  Number - Kind Code (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages of Relevant Figure Appear
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Examiner Signature		E. White		Date Considered	10/28/2005

Attorney Docket Number

<sup>\*</sup>Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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				Application Number	To be assigned 10/797, 938		
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				First Named Inventor	Svenson		
				Group Art Unit	Unknown /623		
				Examiner Name	Unknown White		
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Examiner Date Signature Considered 11/1/20	2005
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